

DSPD Quarterly Support Coordinator Meeting

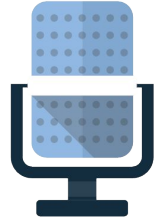


utah department of
human services
SERVICES FOR PEOPLE WITH DISABILITIES

01/20/2021 - 10:30 am - 12:00 pm

Housekeeping

- This meeting is being recorded
- Please mute your microphone
- Recording and PowerPoint will be available early next week at dspd.utah.gov/support-coordinators/
- Questions? Type into chat or email dspdinfo@utah.gov



New DSPD Website Resources

- Person-Centered Planning webpage
 - Individuals and Families tab> Services> Person-Centered Planning
- Be Informed and Be Involved webpage
 - Individuals and Families tab> Resources> Be Informed and Be Involved
- Updated Person-Centered Planning Core Training video
 - Providers, SCs, and Staff tab > Support Coordinators> Support Coordinator Training
- Updated SAS Employee and Employer Agreement Forms
 - Providers, SCs, and Staff tab> Providers> Forms

IDD/MH Professionals Training Events

- For professionals working with and supporting people with IDD/MH needs
- Free online three-day Train the Trainer (Jan. 26-28)
 - <https://dspd.utah.gov/wp-content/uploads/2020/12/ToT-Online.pdf>
- Free online one-day Event (Jan. 25)
 - <https://dspd.utah.gov/wp-content/uploads/2020/12/Foundation-Online.pdf>

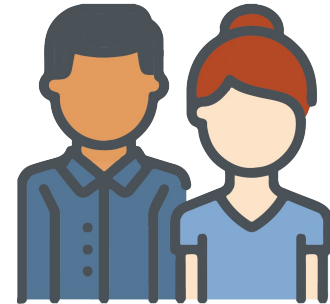


ISO Process

- Individuals may stop reviewing responses from Support Coordinators once they have reached their chosen limits:
 - Date listed on the form
 - Certain number of responses
 - Begin interviewing Support Coordinators as the responses come in and select one
- Individuals can choose a Support Coordinator without using the ISO process if they already have someone in mind

Staff Changes

- Quality Implementation Coordinator
- ESMC Coordinator
- CTW Assistant Caseworkers
- Employment Program Specialist



COVID-19 Updates

COVID-19 Updates: Virtual Visits & PCSP Meetings

- Year extension has been allowed from March 2020-January 2021
 - [DHS Provider COVID-19 FAQ](#)
 - Additional DSPD Specific > Assessments and PCSP's
- Virtual Visits
 - If you must make an in-person visit, please follow the ["In-Person Visits and Your Health"](#) guidance

COVID-19 Updates: Caregiver Compensation

- Extended through March 31, 2021
 - Individuals who have not used Caregiver Compensation, but meet the criteria, may still apply for this service before the end date

<https://dspd.utah.gov/covid-19-information/>



COVID-19 Updates: DSPD Supports During School Hours

- Supports needed for education purposes should be directed to the individual's Local Education Agency (LEA)
 - Work with the LEA first before utilizing DSPD supports
- The Utah Parent Center (UPC) can help families navigate this process
 - utahparentcenter.org



COVID-19 Updates: DSPD Supports During School Hours (cont)

- Requests can be sent to Clay Hiatt at clayhiatt@utah.gov if there is still an increased need for services. These specific requests do not need to go through the RFS process

COVID-19 Information and Resources

▼ Support Coordinators

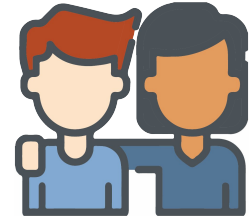
- In-Person Visits and Your Health Guidance
- [FY 2021 RAS Form](#)
- Day to Residential Service Conversion Instructions for FY 2021
- 2021 DSPD Budget Worksheets

COVID-19 Updates: Conversion Calculator

- Updated DSG to 24-hour RHS Conversion Calculator is available in USTEPS through March 2021
- ELS can be used instead of 24-hour RHS when it meets an individual's needs
- If additional funds are needed after they are converted, you can now request them by directly emailing a RAS request form to Clay Hiatt at clayhiatt@utah.gov

COVID-19 Updates: Wait List C.A.R.E.S.

- Services ended on December 30, 2020
- Served 1,472 individuals on the DSPD Wait List



Streamlined Assistive Equipment and Technology Process

Settings Rule Training and Monitoring



utah department of
human services

**DIVISION OF
MEDICAID
& HEALTH
FINANCING**

The Home and Community Based Settings Final Rule

DSPD Support Coordinator Training

The Final Rule: HCBS Setting Requirements

The Home and Community Based Settings Final Rule (or Settings Rule) is a federal rule that governs where and how services are provided to individuals receiving services under a Medicaid Home and Community Based Waiver

All services that are provided through any of the Waivers, including services offered under the Division of Services for People with Disabilities, comply with, or are in transition to comply with this rule

The Final Rule: HCBS Setting Requirements

In your role as a Support Coordinator, you have the responsibility to observe the services provided to individuals and identify when services are not being provided in compliance with the HCBS Settings Rule. Expectations include:

- Identifying and reporting any Settings Rule concerns
- Discussing identified concerns with settings and individuals (if applicable)

The following training will provide you with the knowledge required to support HCBS Settings Rule compliance for the individuals you serve

The Final Rule: HCBS Setting Requirements

Effective date of rule: March 17, 2014

States must demonstrate compliance with the rule by March 17, 2023 for all existing services

New settings must be in compliance now -- before services are provided in the new setting. New Settings include:

- New Provider
- New settings for current providers include:
 - A current program moves into a new location
 - A new service is being provided (either in a current or new setting)
 - A new program is established

Settings that are NOT HCBS or Presumed NOT HCBS

Some settings are Presumed NOT to be HCBS.

1. Settings in a publicly or privately-owned facility providing inpatient treatment
2. Settings on grounds of, or adjacent to, a public institution
3. Settings with the effect of isolating individuals from the broader community of individuals not receiving HCBS

Settings that fall into any of the above categories will be required to go through the **heightened scrutiny (HS)** process.

More information on HS can be found here:

<https://medicaid.utah.gov/Documents/pdfs/ltc/hcbstransition/Files/HeightenedScrutiny.pdf>

Settings that are NOT HCBS or Presumed NOT HCBS

CMS intends to take the following factors into account in determining whether a setting may have the effect of isolating individuals receiving Medicaid HCBS from the broader community:

- Individuals have limited, if any, opportunities for interaction in and with the broader community;
- The setting restricts beneficiary choice to receive services or to engage in activities outside of the setting; or
- The setting is physically located separate and apart from the broader community and does not facilitate beneficiary opportunity to access the broader community and participate in community services

Compliance & Facilitating Opportunity

Throughout this presentation ***“facilitating opportunity”*** is used to describe what is required of the setting. What does this mean?

The requirement of facilitating opportunity can look different depending on the circumstances:

- The settings provides the resources required (e.g. transportation, activities, funding, support staff, etc.)
- The setting provides training or support to access resources not provided by the setting (public transportation, how to contact case coordinator or natural supports, budgeting, etc.)

Settings that are NOT HCBS or Presumed NOT HCBS

Rural settings:

- Settings located in rural areas are not automatically presumed to have qualities of an institution

You can find additional guidance on isolating and institutional factors and how to overcome them here:

https://medicaid.utah.gov/Documents/pdfs/ltc/hcbstransition/Files/Isolating_Institutional.pdf

HCBS Setting Requirements

The Settings Rule defines that a Home and community based Setting:

- Is integrated in and supports access to the **greater community**
- Ensures the individual receives services in the community and in their home to the same degree of access as individuals not receiving Medicaid home and community based services (HCBS)
- Optimizes individual initiative, autonomy, and independence in making life choices
- Ensures an individual's rights of privacy, dignity, respect, and freedom from coercion and restraint

HCBS Setting Requirements

Reverse integration activities are not sufficient to meet the true intent and spirit of the HCBS settings rule

(Reverse integration involves bringing people and activities from the broader community into the setting, instead of supporting people in the setting to access the broader community)

Visits by community members have value, but cannot replace community access for individuals

****Let's talk about COVID-19**

<https://medicaid.utah.gov/Documents/pdfs/ltc/hcbstransition/Files/Settings-Rule-Progress-During-COVID-19.pdf>

HCBS Setting Requirements

Former Practice

- Practice skills in facility (role playing)
- Bring in visiting artists/classes
- Employed by the provider
- Group planning
- Provider creates the program schedule
- Over-protection
- Limited choice

New Practice

- Practice skills in community
- Identify community classes
- Competitive Integrated Employment
- One person at a time
- Individuals create their schedule
- Positive risk-taking
- Informed decision making

HCBS Setting Requirements

Community Integration

- The setting provides a variety of experiences, including new experiences
- Diversity of choice is evident in integration activities
- Meaningful integration of individuals is a part of community activities
- Activities foster relationships with community members unaffiliated with the setting
- The setting has a process in place to evaluate individual wants/needs and take active measures to meet those needs

HCBS Setting Requirements

Competitive Integrated Employment and Volunteer Activities

- There is a process in place to promote competitive integrated employment, volunteer opportunities, and meaningful skill building opportunities
- Work space and work skills are distinct from other activities in the training environment (where people complete work activities or learn work skills in a setting is separate from where they do other activities)
- If an individual is interested in a specific work environment, they are given the opportunity to explore and experience that environment
 - *Not everyone is expected to work; facilitating opportunity is the expectation

HCBS Setting Requirements

Optimizing Individual Initiative

- The setting affords dignity to the diners (i.e. not required to wear bibs, use lids on cups, only allowed to eat or drink in designated areas, etc.)
- Individual(s) can sit in any seat in the dining area, can eat privately if desired, and can request an alternative meal
- Individuals can choose to prepare their own meals or eat as a group
- The setting allows the individual(s) to engage in legal activities (ex. voting when 18 or older, consuming alcohol when 21 or older, watching R or X rated movies, going to a club or bar, etc.) in a manner consistent with individuals not receiving Medicaid funded services and supports

HCBS Setting Requirements

Individualized Services and Schedules

- The setting reflects individual needs and preferences and ensure the informed choice of the individual(s) based on their resources
- Individuals are a part of the process that determines and/or identifies the activities put on the schedule
- Activities and schedules are not designed for the convenience of staff
- There is a process in place for individuals to choose what activities they participate in
- There are no activities that individuals are required to participate in

HCBS Setting Requirements

Individualized Services and Schedules

- The setting facilitates opportunity for individuals to access non-disability specific settings such as community classes, salons, churches, etc.
- Staff promote individuals making decisions and exercising choice in all areas

Individualized Services and Schedules in a group setting

- Designing activities that begin as small group activities but allow for some individualization and individual personal growth and development as part of the activity

HCBS Setting Requirements

Individualized Services and Schedules in a group setting

Example: Individuals choose to participate in an art class

- One individual has a money goal: staff supports them to budget and make the transaction to pay for the class
- Another individual has a socialization goal: staff supports them to introduce themselves and sit by someone new
- A third individual is working on focusing on the task at hand: staff supports the individual to stay on task and follow the class instructions
- Another individual has a hard time making choices for themselves: staff supports them to make choices when required (what colors to use, what project to work on, where to sit, etc.)

HCBS Requirements for Provider-owned or Controlled Residential Settings

These include the following:

- The individual has a lease or other legally enforceable agreement providing similar protections
- The setting ensures the individual has privacy in their sleeping or living unit including lockable doors, choice of roommates, and freedom to furnish or decorate the unit
- The setting ensures the individual has the freedom and support to control his/her own schedule and activities, and have access to food at any time
- The individual can have visitors of his/her choosing at any time
- The setting is physically accessible to the individual

More information on what Provider-owned or Controlled means can be found here:

<https://medicaid.utah.gov/Documents/pdfs/ltc/hcbstransition/Files/ProviderOwned.pdf>

HCBS Requirements for Provider-owned or Controlled Residential Settings

The individual can have visitors of his/her choosing at any time.

- There are no set visiting hours; this includes overnight visitors
- There are no restricted visitor meeting areas
- Individual(s) can have private visits with family and friends

If all of the individuals receiving services in the setting agree to “house rules” as roommates and it is their choice to follow those rules that is their choice.

- At no time can the provider or staff implement or enforce those rules
- The provider or staff can assist the individuals in the process of the roommates addressing the rules
- Staff support could include scheduling a meeting, preparing for the meeting, and walking through the supported decision making process

HCBS Requirements for Provider-owned or Controlled Residential Settings

Supported Living Settings

If an individual chooses to live in a provider owned and/or controlled setting and receives supported living services, they can choose who provides those services, including the provider who controls and/or owns the setting

Additional information on supported living settings can be found here:

<https://medicaid.utah.gov/Documents/pdfs/lrc/hcbstransition/Files/SeperationHousingHCBS.pdf>

HCBS Setting Requirements: Modifications and Restrictions

A rights restriction is a limitation to the rights of an individual due to a specific assessed need in order to support the health, safety, and well-being of the individual and/or the community

It is a provider's responsibility to assure safety, AND individuals have the right to make decisions in their life.

We all make decisions that are not always the healthiest or safest.

When these conflict, the team must consider the severity and the likelihood of potential negative outcomes against the rights of the individual and limit those rights only when truly necessary, and according to the requirements of the Settings Rule.

HCBS Setting Requirements: Modifications and Restrictions

In these circumstances the modifications or restrictions must be:

- Supported by an individualized specific assessed need
- Justified and documented as part of the person-centered process which includes:
 - Specific individualized assessed need
 - Prior interventions and supports including less intrusive methods
 - Description of condition proportionate to assessed need
 - Ongoing data measuring effectiveness of modification
 - Established time limits for periodic review of modifications
 - Individual's informed consent
 - Assurance that interventions and supports will not cause harm

For individuals receiving services under DSPD, these generally must also be approved by a Human Rights Committee

HCBS Setting Requirements: Modifications and Restrictions

- Restricting independence or access to resources is appropriate only to reduce specific risks
- Controls on personal freedoms and access to community cannot be imposed on a class or group of individuals
- Restrictions or modifications cannot be implemented as “house rules” in any setting, regardless of the population served and must not be used for the convenience of staff
- Documentation of a diagnosis is not sufficient justification. This section must clearly demonstrate an assessed need for the modification including critical events or situations that have transpired that support the need for the modification

HCBS Setting Requirements: Modifications and Restrictions

An individualized rights restriction used for an individual cannot affect another individual in the same setting, to the greatest extent possible

- For those restrictions that affect other individuals in the setting, there must be a way for them to circumvent the restriction

For example,

- If an individual requires a food restriction that results in the refrigerator being locked, there must be a way for other individuals to access that food (e.g. access to key, code, etc.)
- If an individual requires a media restriction of any media PG13 or above, there needs to be a way for other individuals to access that type of media (e.g. watching on personal devices, having an agreed upon media schedule, etc.)

Resources

For additional information on restrictions and modifications go here:

<https://medicaid.utah.gov/Documents/pdfs/ltc/hcbstransition/Files/RestrictModFlyer.pdf>

<https://medicaid.utah.gov/Documents/pdfs/ltc/hcbstransition/Files/RestrictModExamples.pdf>

Sign up for the HCBS Newsletter Subscription here:

<https://medicaid.utah.gov/medicaid-long-term-care-and-waiver-programs/>

Note: This is how all additional guidance and settings news will be communicated

HCBS Settings Rule Transition Home Page:

<https://medicaid.utah.gov/ltc/hcbstransition/>

Coordination with Vocational Rehabilitation (VR)

Collaboration between DSPD and VR

Reminders

- Employment First initiative
- DSPD staff coordinate issues, questions or unique cases with VR on a consistent basis.
- DSPD does not require an individual to sign up for VR, but might ask that an individual meets with a VR Counselor for informed choice.
- DSPD does not require an individual to complete a Work Strategy Assessment (WSA). WSA's should be authorized when an individual has expressed interest in working and in collaboration with a VR Counselor.
- DSPD might request information or a status update from VR. VR Services and funding should be sought if available. If VR services are not available through a local VR office, DSPD employment services are available to support Competitive Integrated Employment.

Collaboration between DSPD and VR

- If steps of the DSPD Employment Process are skipped, completed incorrectly or ignored, this negatively impacts mutual clients.
 - If steps in the VR process are not completed appropriately, service provision may be delayed or denied, negatively impacting our mutual clients
- **Example:** Utilizing previously approved DSPD employment services to support a new job search or placement

Additional Information

- Drafted a DSPD/VR Process Workflow
 - Outlines specific steps to coordinate DSPD and VR Services
 - Identifies responsibilities of VR Counselor, Support Coordinator, individuals receiving VR services and CRPs (Community Resource Programs)
- VR representative will be at a future meeting to discuss expectations, best practices and roles and responsibilities for: VR Counselor and Support Coordinators
 - Submit questions to brynpeterson@utah.gov or (385) 228-3122

Quality Improvement Update

Performance Measure Updates

- Coordinating with agency partners to identify unreported critical incidents
- Please make sure whenever you become aware of abuse, neglect, or exploitation experienced by an individual in services that you notify both APS/CPS and submit a critical incident report in USTEPS/UPI.

Incident Reporting

- Continued partnership with the Office of Licensing (OL)
 - Survey sent out last fall
- Currently working on a handbook for Support Coordinators

“Significant Health Changes”

- Health Status changes would speak to any change in physical or mental health which has a direct impact on re-evaluating items specifically listed in Level of Care and Functional Limitations:
 - Self-care
 - Receptive and expressive language
 - Learning
 - Mobility
 - Self-direction
 - Capacity to live independently
 - Capacity to become economically self-sufficient (age 18 and over)

“Significant Health Changes” (cont.)

- Support Coordinators indicate that a full level of care reevaluation is needed when selecting “the person’s needs cannot be met on the waiver” in the USTEPS Consumer Health Treatment page
- Compliance with health treatment screening and LOC evaluations is reported annually to CMS

When to Notify Waiver Managers

- x **Do not need** to notify the Waiver Manager about hospitalizations
 - ✓ **Do need** to enter hospitalization information in the Health Treatment section in USTEPS
- ✓ **Do need** to notify the Waiver Manager about:
 - Incarcerations, missing persons, longer-term admits to other care facilities such as Skilled Nursing Facilities, Intermediate Care Facilities, Rehabilitation Centers, other incidents that can affect a person's waiver status

Q&A

- Type into chat or email
dspdinfo@utah.gov



Next Quarterly Support Coordinator Meeting

- Wednesday, April 21, 2021
from 10:30 am - 12:00 pm

dspd.utah.gov/support-coordinators/



Next Family and Self-Advocate Gathering

- Wednesday, February 10, 2021
 - Day: 11:30 am - 1:00 pm
 - Evening: 6:30 pm - 8:00 pm

dspd.utah.gov/be-informed-and-be-involved/



RESOURCES

Be Informed and Be Involved

Find a Support Coordinator

Find a Provider

Find a Community Engagement Resource

Emergency Preparedness

Monthly NCAPPS Webinars

- What Does a Person-Centered System Look Like? Introducing the NCAPPS Person-Centered Practices Self-Assessment
 - Thursday, February 11 from 12:30 - 2 pm MST

ncapps.acl.gov/webinars.html

